

Sl.No.	Name of State/Union Territory	Details of cases reported
11.	Sikkim	Nil
12.	Tripura	377
13.	Uttar Pradesh	Nil
14.	Chandigarh	14995
15.	Dadra and Nagar Haveli	Nil
16.	Daman & Diu	Nil
17.	Lakshadweep	1
18.	Madhya Pradesh	609
19.	Uttaranchal	27
20.	Andhra Pradesh	Nil
21.	Nagaland	Nil
22.	West Bengal	1425
23.	Pondicherry	Nil
24.	Tamil Nadu	100

The States/UTs namely Assam, Bihar, Chhattishgarh, Jharkhand, Jammu & Kashmir, Karnataka, Kerala, Maharashtra, A & N Islands, Orissa & Rajasthan have not responded.

### **Leprosy, TB, Kala-Azar and Malaria control**

†1884. SHRI MANGANI LAL MANDAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that diseases such as leprosy, T.B., malaria and kala-azar continue to spread in the country; and

(b) if so, the details thereof including the view point and time fixed for their prevention and complete eradication by Government, State-wise?

†Original notice of the question was received in Hindi.

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRIMATI PANABAKA LAKSHMI): (a) and (b) The spread of Leprosy has been reduced remarkably as a result of early diagnosis of cases and prompt treatment with MDT drugs. The country has achieved the goal of leprosy elimination as a public health problem [i.e. Prevalence Rate (PR) less than 1/10,000 population] at National level by December, 2005 as set by National Health Policy, 2002. As on 30th September, 2006, the Prevalence Rate has further reduced to 0.89/10,000 population and 27 States/UTs have also achieved leprosy elimination status. Prevention and complete eradication of leprosy is presently not possible as we lack the tools both to protect people from developing leprosy and to diagnose and treat the disease in its sub clinical form.

The number of TB cases reported under National TB Control Programme have been more or less static during last few years. Due to epidemiological situation pertaining to TB disease, presently it is not feasible to target for its eradication. However, to control TB, with an objective to achieve cure rate of 85% of new sputum cases, the Revised National TB Control Programme (RNTCP) widely known as DOTS, which is WHO recommended strategy, was implemented in the country in a phased manner from 1997 and the entire country had been covered by March, 2006.

Malaria is a public problem in the country. However, there has been decline in the incidence of malaria over the years. Kala-azar is endemic in 53 districts of 4 States namely Bihar (33), Jharkhand (4), Uttar Pradesh (5) and West Bengal (11). A comprehensive National Vector Borne Disease Control Programme (NVBDCP) is being implemented in the entire country for prevention and control of vector borne diseases namely Malaria, Filaria, Kala-azar, Japanese Encephalitis (J.E.) Dengue, and Chikungunya. The programme is implemented by the States through the existing primary health care system. The objective of the programme is to control malaria and elimination of Kala-azar by 2010.

### **Criteria for declaring an epidemic**

1885. SHRI MAHENDRA MOHAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) what are the criteria for declaring any disease to be as an epidemic;